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PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

Approved for use through January 2008. GPO 0007-0007.

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 10/815,621

Filing Date 8-11-2024

First Named Inventor

Art Unit 1004

Examiner Name _____

Amazon Dash AN

Attorney Docket Number HYC001US

ENCLOSURES *(Check all that apply)*

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group		
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please Identify below):		
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<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund			
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____			
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<table border="1"> <tr> <td>Remarks</td> <td> Email: kia.silverbrook@silverbrookresearch.com Telephone: 61-2-9818-6633 Facsimile: 61-2-9818-6711 </td> </tr> </table>		Remarks	Email: kia.silverbrook@silverbrookresearch.com Telephone: 61-2-9818-6633 Facsimile: 61-2-9818-6711
Remarks	Email: kia.silverbrook@silverbrookresearch.com Telephone: 61-2-9818-6633 Facsimile: 61-2-9818-6711			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kia Silverbrook c/Silverbrook Research Pty. Ltd. 393 Darling Street, Balmain, NSW, 2041, Australia
Signature	
Date	October 13, 2004

CERTIFICATE OF TRANSMISSION/MAILING

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OCT 18 2004

PTO/SB/08A (10-01)

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Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet 1 of 2

Complete if Known

Application Number	10/815,621
Filing Date	April 2, 2004
First Named Inventor	Kia Silverbrook
Art Unit	1653
Examiner Name	
Attorney Docket Number	HYC001US

Examiner Signature		Date Considered	
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***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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Substitute for form 1449B/PTO		<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT		Application Number	10/815,621
		Filing Date	April 2, 2004
		First Named Inventor	Kia Silverbrook
		Group Art Unit	1653
		Examiner Name	
(use as many sheets as necessary)		Attorney Docket Number	HYC001US
Sheet	2	of	2

OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS

Examiner Signature _____ Date Considered _____

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